

Non-Compliance Report Form

Facility Name: _					
Facility Address:	:				
Person Reporting:		Title:			
Phone Number:		Parish:			
Receiving Water (Refer to Subject Line on)					
Date of Non- Compliance	Parameter/ Description (e.g. TSS, Overflow)	Outfall No./ Location (e.g. 001, 123 Main St.)	Permit Limit	Reported Value	
Cause of Violation	n(s):				
Corrective Action	/Preventative Meas	ures/Remediation:			
			-		

Please mail non-compliance reports to the following address:

Office of Environmental Compliance

Attn: Permit Compliance Unit

P.O. Box 4312

Baton Rouge, LA 70821-4312